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PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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|---|------------------------|-----------------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) | Application Number     | 09/929,584      |
|   | Filing Date            | August 14, 2001 |
|   | First Named Inventor   | Reynolds        |
|   | Art Unit               | 3763            |
|   | Examiner Name          | Lina Kontos     |
| Total Number of Pages in This Submission  | Attorney Docket Number | 41530/28291     |

**ENCLOSURES (Check all that apply)**

|  |  |   |         |          |
|--|--|---|---------|----------|
| <input checked="" type="checkbox"/> Amendment Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input checked="" type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declarations(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence<br>Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |         |          |
| <table border="1"><tr><td>Remarks</td><td>Postcard</td></tr></table>   |  |   | Remarks | Postcard |
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|                         |                                 |  |  |
|-------------------------|---------------------------------|--|--|
| Firm or Individual Name | Kimberly H. Lu, Reg. No. 51,973 |  |  |
| Signature               |                                 |  |  |
| Date                    | 5/28/04                         |  |  |

**CERTIFICATE OF TRANSMISSION/MAILING**

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| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as Express Mail, Label No. EV482531030US in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. |                |      |         |
| Typed or printed name  | Kimberly H. Lu |      |         |
| Signature  |                | Date | 5/28/04 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| <b>Express Mail No: EV482531030US</b>  | <b>Attorney Docket No.</b> | 41530/28291           | <b>First Inventor:</b> Reynolds et al. |
| <b><u>AMENDMENT TRANSMITTAL LETTER</u></b><br><br><b>Titl : Bilayer Electrodes</b> |                            | <b>Serial No.</b>     | 09/929,584                             |
|  |                            | <b>Filing Date</b>    | August 14, 2001                        |
|  |                            | <b>Examiner</b>       | Lina Kontos                            |
|  |                            | <b>Group Art Unit</b> | 3763                                   |

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

☒ Large Entity Status

☐ Small Entity status of this application has been established under 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

| CLAIMS AS AMENDED - PART II |   |     |                                    |               |                  | SMALL ENTITY   |                  | OTHER THAN SMALL ENTITY |      |
|-----------------------------|---|-----|------------------------------------|---------------|------------------|----------------|------------------|-------------------------|------|
|                             | (Column 1)  |     | (Column 2)                         | (Column 3)    |                  |                |                  |                         |      |
| AMENDMENT                   | CLAIMS REMAINING AFTER AMENDMENT                                |     | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE             | ADDITIONAL FEE | RATE             | ADDITIONAL FEE          |      |
|                             | Total (37 CFR 1.16(c))  | *27 | Minus                              | **27          | =0               | x \$ _____ =   | 0.00             | x \$ _____ =            | 0.00 |
|                             | Independent (37 CFR 1.16(b))                                    | *3  | Minus                              | ***3          | =0               | x \$ _____ =   | 0.00             | x \$ _____ =            | 0.00 |
|                             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) |     |                                    |               |                  | x \$ _____ =   |                  | + \$ _____ =            |      |
|                             |   |     |                                    |               | TOTAL ADDIT. FEE | 0.00           | TOTAL ADDIT. FEE | 0.00                    |      |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

☐ Petition of Extension of Time.

☒ No additional fee is required for amendment.

☐ A check in the amount of the fee is enclosed.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. 20-0823.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-0823.  
I have enclosed a duplicate copy of this sheet.

☒ Any additional filing fees required under 37 C.F.R. 1.16.

☒ Any patent application processing fees under 37 C.F.R. 1.17.

Kim H. Lu  
Signature  
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